



WIC Participant Rights and Responsibilities

You have the right to:

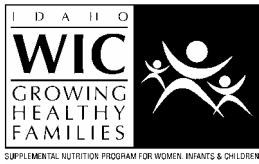
- Fair and respectful treatment from WIC staff and grocery store employees. If you feel you have not been treated with respect, ask to talk to the WIC Coordinator.
- Nutrition education and information about health care and other helpful services.
- Select any Idaho authorized WIC grocery store.
- Transfer papers if you plan to move.
- Notice of when and why your WIC program benefits will end.
- Ask for a fair hearing if you disagree with decisions regarding your eligibility.

You have the responsibility to follow all of the program rules listed below.

- Provide truthful information to WIC staff. You can be charged with fraud and removed from WIC for not telling the truth.
- Come to WIC appointments on time or call ahead if you cannot come to your appointment.
- Receive WIC benefits from only one WIC clinic at a time.
- Tell WIC staff about changes in your address, phone number, household size, and income.
- Bring your *WIC Identification Folder* to every WIC appointment and every time you use a WIC check at the grocery store.
- Treat WIC staff and grocery store employees with respect and courtesy.
- Use WIC foods for the person who is on WIC, not other household members.
- Follow the rules for shopping with WIC checks. They are written on the *WIC Identification Folder*.
- Purchase only Idaho authorized WIC foods with WIC checks.
- You cannot return WIC foods to the grocery store for money, credit, or other items. Do not sell, trade, or give away WIC checks or WIC foods.
- Do not change the foods or quantities listed on WIC checks. You can be charged with fraud for altering checks.
- Report lost or stolen checks to WIC staff even though they cannot be replaced. If you find the checks later, do not use them. Call the WIC office to find out what to do with the checks.

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. (Not all prohibited bases apply to all programs.)

To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call (202)720-5964 (voice and TDD). The WIC Program is an equal opportunity provider and employer.



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By reading the other side and signing this form, you agree to the following:

- staff have explained your rights and responsibilities for participating in WIC
- you understand your rights and responsibilities
- you agree to follow them

Your rights and responsibilities are also written inside the *WIC Identification Folder*.

1.	_____	_____
	Signature of Responsible Adult	Date
2.	_____	_____
	Signature of Responsible Adult	Date
3.	_____	_____
	Signature of Responsible Adult	Date
4.	_____	_____
	Signature of Responsible Adult	Date
5.	_____	_____
	Signature of Responsible Adult	Date
6.	_____	_____
	Signature of Responsible Adult	Date
7.	_____	_____
	Signature of Responsible Adult	Date
8.	_____	_____
	Signature of Responsible Adult	Date
9.	_____	_____
	Signature of Responsible Adult	Date
10.	_____	_____
	Signature of Responsible Adult	Date

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